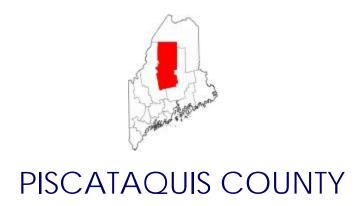
COMMUNITY NEEDS ASSESSMENT • 2011







Piscataquis County

At 3,966.22 square miles and 4.4 persons per square mile, Piscataquis County is a designated "frontier county." On average, its residents are older, poorer, and less educated than their statewide peers.

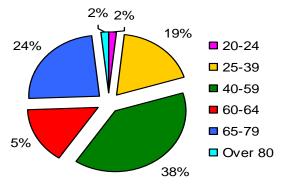
People QuickFacts	Piscataquis County	Maine
Population, 2010	17,535	1,328,361
Population, percent change, 2000 to 2010	1.7%	4.2%
Population, 2000	17,237	1,274,915
Persons under 5 years old, percent, 2009	5.0%	5.4%
Persons under 18 years old, percent, 2009	19.8%	20.6%
Persons 65 years old and over, percent, 2009	18.5%	15.6%
Median Age, 2010	48.1	42.7
White persons, percent, 2010 (a)	96.9%	95.2%
Black persons, percent, 2010 (a)	0.3%	1.2%
American Indian and Alaska Native persons, percent, 2010 (a)	0.5%	0.6%
Asian persons, percent, 2010 (a)	0.7%	1.0%
Native Hawaiian and Other Pacific Islander, percent, 2010 (a)	Z	Z
Persons reporting two or more races, percent, 2010	1.2%	1.6%
Persons of Hispanic or Latino origin, percent, 2010 (b)	1.0%	1.3%
White persons not Hispanic, persons, 2010	96.3%	94.4%
Living in same house 1 year ago, pct 1 yr old & over, 2005-2009	85.5%	85.6%
Foreign born persons, percent, 2005-2009	1.3%	3.3%
Language other than English spoken at home, pct age 5+, 2005-2009	2.5%	7.4%
High school graduates, percent of persons age 25+, 2005-2009	88.1%	89.4%
Bachelor's degree or higher, pct of persons age 25+, 2005-2009	14.1%	26.1%
Veterans, 2005-2009	2,145	139,410
Mean travel time to work (minutes), workers age 16+, 2005-2009	23.2	22.7
Housing units, 2009	14,347	704,578
Homeownership rate, 2005-2009	77.7%	72.8%
Housing units in multi-unit structures, percent, 2005-2009	9.3%	19.8%
Median value of owner-occupied housing units, 2005-2009	\$98,100	\$172,100
Households, 2005-2009	7,651	542,617
Persons per household, 2005-2009	2.23	2.36
Per capita money income in past 12 months (2009 dollars) 2005-2009	\$19,677	\$24,980
Median household income, 2009	\$34,922	\$45,708
Persons below poverty level, percent, 2009	16.1%	12.6%

The 2010 Penquis Community Needs Assessment reported on a number of indicators: poverty, employment, education, transportation, housing, food insecurity, health and well being, and child health and welfare. Much of the data were obtained from various sources external to Penquis. In September 2010, Penquis began conducting its own survey of current clients and visitors. Surveys were made available in Penquis' biannual client newsletter, The Penquis Journal; online using Survey Monkey; and at Penquis offices within its three-county service area. The objective was to obtain first-hand accounts of the challenges and needs of individuals receiving and seeking assistance and local perspectives regarding community needs. It touched on fundamental issues such as education, employment, finances, health, housing, and social supports. The results are provided below. The numbers and percentages associated with survey responses reflect only complete answers received to the questions asked. Non-responses were not included in the tabulations.

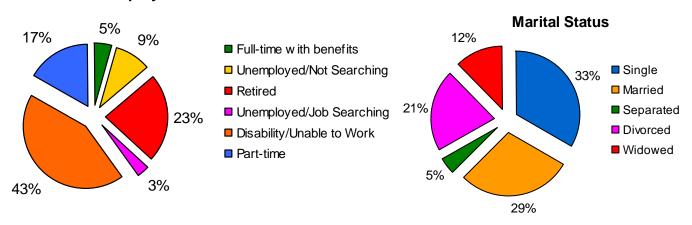
THE RESPONDENTS

- Sixty-eight (68) individuals from Piscataquis County completed the survey.
- The majority of respondents (39.0%) were 40-59 years of age, which is consistent with the median age of Piscataguis County residents (48.1 years).
- Sixty-one percent (61.0%) of respondents were female and 39.0% were male.
- The majority (33.3%) were single, followed by married (28.8%), divorced (21.2%), widowed (12.1%) and separated (4.5%).
- Most (72.7%) did not have children under 18 living in the home; 27.3% did. Of those who did, 50.0% had one child living in the home; 25.0% had two; 18.8% had three; and 6.3% had four.
- The majority (43.8%) had a disability and/or were unable to work; 23.4% were retired; 17.2% worked part time;
 9.4% were unemployed and not seeking employment;
 4.7% worked full-time with benefits; and 3.1% were unemployed and seeking employment.

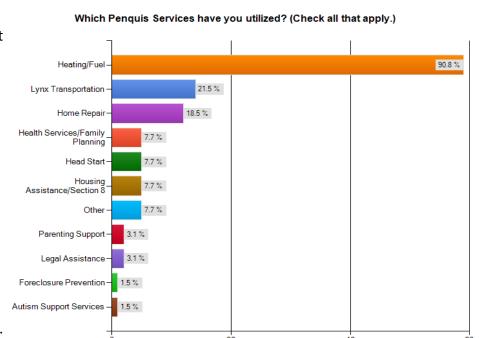
Age of Survey Respondents



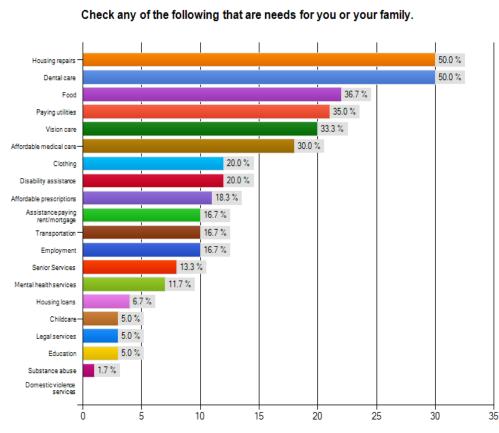
Employment Status



The overwhelming majority of respondents (90.8%) were past or current participants in the Low-income Home Energy Assistance Program. The next most utilized service was the Lynx Transportation (21.5%), followed by Home Repair (18.5%). Health Services/ Family Planning, Head Start, Section 8 and Other services were utilized equally, at 7.7%, followed by Parenting Support and Legal Assistance, both at 3.1%, and Foreclosure Prevention and Autism Support Services, both at 1.5%.

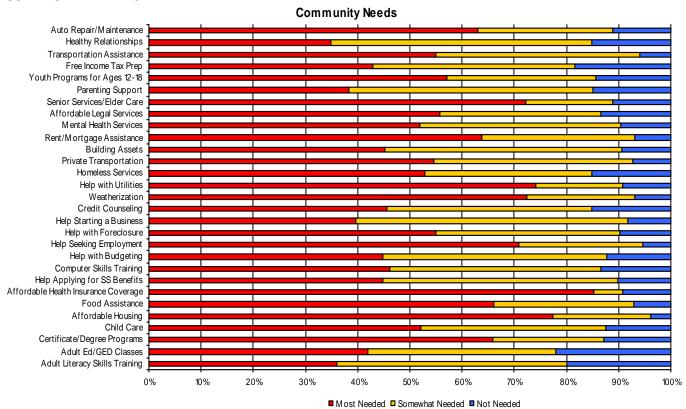


While 18.5% of respondents had reported utilizing the Home Repair program, 50.0% of respondents had reported home repair as a need. The Penquis Home Repair program has historically been oversubscribed, with long waiting lists and limited funding, so the discrepancy between need and program participation is likely due to the lack of program resources rather than lack of program awareness or eligibility. Fifty percent (50.0%) of respondents also cited dental care as a need, followed by Food



(36.7%); Paying Utilities (35.0%); Vision Care (33.3%); and Affordable Medical Care (30%). Clothing and Disability Assistance were each identified as a need by 20% of respondents. 16.7% reported needing help with Rent/Mortgage, Transportation, and Employment. Fewer than 10% of respondents listed Housing Loans (6.7%), Child Care (5%), Legal Services (5%), Education (5%), and Substance Abuse Services (1.7%), and no one reported needing domestic violence services.

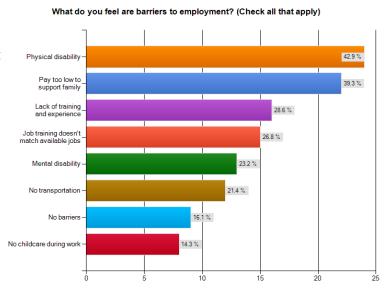
COMMUNITY NEEDS



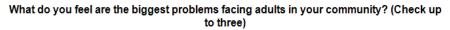
When asked to identify community needs, Affordable Health Insurance Coverage topped the list, with 85.2% of respondents citing it among the "most needed" services. Affordable Housing was second on the list at 77.4% and Help with Utilities third at 74.1%. Weatherization at 72.4% and Senior Services/ Elder Care at 72.2% rounded out the top five "most needed" services. Of the 29 services listed, 18 (62.1%) were deemed "most needed" by more than 50% of respondents. The top three "needed" services (those most often identified as "most" or "somewhat" needed) were Affordable Housing (96.3%), Help Seeking Employment (94.5%), and Transportation Assistance (94.1%). Those identified most often as "not needed" were Adult Education/GED Classes, Adult Literacy Skills Training, and Free Income Tax Preparation, though these programs/services were still rated as "most needed" or

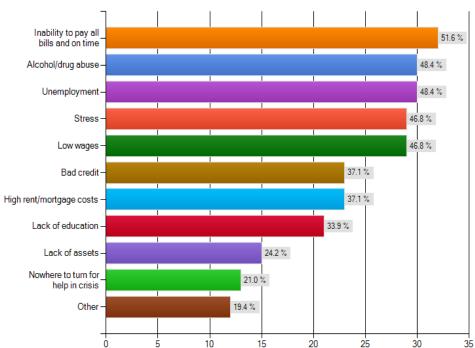
"somewhat needed" by 78.0%, 80.0% and 81.7% of respondents, respectively.

Help Seeking Employment was the sixth "most needed" service in the community, cited by 70.9% of respondents (16.7% reported it as a personal or family need). The top barriers to employment identified were Physical Disability (42.9%), Pay Too Low to Support Family (39.3%), Lack of Training and Experience (28.6%), Job Training Doesn't Match Available Jobs (26.8%), Mental Disability (23.2%), No Transportation (21.4%), and No Childcare During Work (14.3%). More than 16% of respondents reported No Barriers to employment.



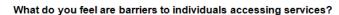
Community needs reported by respondents under "Other" include home repair, winterization, dental care, fuel assistance, help getting hearing aides, lawn and home care, jobs, parenting support for families with children (teenagers) with autism, help for people getting injured on the job, family planning, first—time home buyer information, and helping people with bad/no credit re-establish credit and purchase a home.

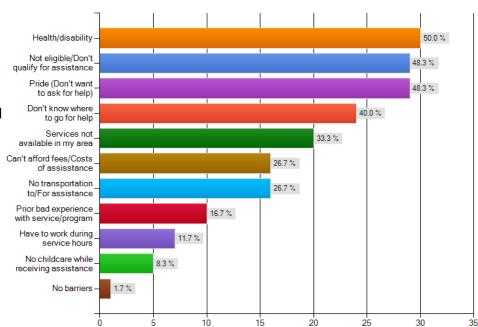




The top three problems facing adults in the community were believed to be Inability to Pay All Bills and On Time (51.6%), Alcohol/Drug Abuse (48.4%), and Unemployment (48.4%). Stress and Low Wages followed at 46.8% each and Bad Credit and High Rent/ Mortgage Costs rounded out the top seven at 37.1% each. Lack of Education (33.9%), Lack of Assets (24.2%) and Nowhere to Turn for Help in Crisis (21.0%) completed the top 10. 19.4% of respondents checked "Other." No narrative option was 35 available for explanations.

Health/Disability was believed to be the greatest barrier to individuals accessing services, cited by 50.0% of respondents (43.8% of respondents had identified their employment status as Disability/Unable to Work and 42.9% had identified it as the greatest barrier to employment). Not Eligible/ Don't Qualify for Assistance and Pride (Don't want to ask for help) followed closely at 48.3% each. Don't Know Where to Go For Help was fourth, at 40%, and Services Not Available in My Area was fifth, at 33.3%. Only 1.7% of respondents cited No Barriers.





SUPPORTING DATA

While there were differences between the individual/family needs and community needs identified, issues of health care, safe, affordable housing and financial security were common to both. Recent data from external sources are provided below for further assessment of current conditions.

Health Care

For overall health outcomes, Piscataquis County ranks 10th out of Maine's 16 counties, reports County Health Rankings, a project of the University of Wisconsin's Population Health Institute and the Robert Wood Johnson Foundation. According to the results of a 2010 OneMaine Health Collaborative Community Health Needs Assessment, conducted on behalf of Eastern Maine Healthcare Systems, MaineGeneral Health, and MaineHealth, Piscataquis County residents face numerous health challenges and risks. Twenty percent (20.0%) of Piscataquis County residents report their health as Fair to Poor, compared to 15.0% of all Mainers. It also has disease incidence and prevalence rates (per 100,000 population) unfavorable to state rates. Of all Maine counties, Piscataquis County has the second highest incidence of all cancers (779 vs. 629 for the State), and high incidence of bladder cancer (45 vs. 35), female breast cancer (232 vs. 162), colorectal cancer (77 vs. 62), lung and bronchus cancer (119 vs. 95), and male prostate cancer (243 vs. 187).

Also, compared to state rates, Piscataquis County has a high percentage of diagnosed diabetes (13.0% vs. 10.0%), particularly among 18-44 year olds (7.9% vs. 2.9%), and a greater prevalence of 3+ chronic conditions (14.0% vs. 13.0%). Residents report a high prevalence of high cholesterol (32.0% vs. 29.0%), hypertension (35.0% vs. 30.0%) and heart disease (6.9% vs. 6.3%), and a high prevalence of risk factors, including sedentary lifestyle (26% vs. 21%) and adult obesity (33.0% vs. 28.0%).

Compared to Maine, Piscataquis County has a higher hospital admission rate overall (13,488 vs. 12,076 per 100,000 population) as well as for AMI (heart attack) (359 vs. 211), cerebrovascular disease (stroke) (197 vs. 149), coronary artery bypass graft (CABG) (77 vs. 62), chronic obstructive pulmonary disease (COPD) (318 vs. 284), pneumonia (509 vs. 326), and emphysema (38 vs. 23). It has the highest hospital admission rate of any county for diabetes, 150 vs. 79. Ambulatory care sensitive condition (ACSC) Emergency Department visit rates is higher for diabetes short-tem complications (15 vs. 9), diabetes long-term complications (209 vs. 111), and diabetes uncontrolled (15 vs. 11). Piscataquis County has a higher Emergency Department visit rate overall (59,780 vs. 47,665) as well as for bronchitis and asthma (1,636 vs. 988), COPD (1,316 vs. 998), and pneumonia (1,042 vs. 505).

Piscataquis County has the highest mortality rate of any Maine county for smoking related neoplasms (males, 267 vs. 205; females, 197 vs. 150) and bladder cancer (14.0 vs. 7.5), and a high mortality rate for chronic obstructive pulmonary disease (COPD) (ages 65+) (369 vs. 332). It also has mortality rates higher than state rates for all cancers (296 vs. 234), colorectal cancer (27 vs. 21), lung cancer-males (95 vs. 78), melanoma (3.9 vs. 3.6), and male prostate cancer (24 vs. 23).

Reproductive Health: The teen birth rate (10-17 years) per 1,000 female population is 6.2 vs. 4.1 for Maine. There is a greater high risk pregnancy hospital admission rate (10-44 year old females), 500 vs. 360; and a higher prevalence of inadequate prenatal care (of live births), 3.5% vs. 2.5%, of low birthweight newborns (<2500 grams), 7.5% vs. 6.4%, and prematurity (<37 weeks), 9.4% vs. 8.7%.

<u>Dental Care</u>: 32% of Piscataquis County residents has had no dental visit in the past two years, compared to 24% of all Mainers. According to the Maine Office of Rural Health and Primary Care, there is a shortage of dentists in every Maine county. In 2006 there were seven dentists in Piscataquis County, 1:2,504 residents. Maine has one dentist per 2,300 residents, and the national average is one per 1,600. Many dentists do not accept Medicaid, further hindering access to needed care. Many Mainers are using emergency rooms, rather than dentists, to treat problems with their teeth, according to a 2010 study by the Muskie School of Public Service at the University of Southern Maine. "The top diagnostic reason for an emergency department visit among both Maine Care and uninsured young adults aged 15 through 24 and adults aged 25 through 44 was dental disease." While emergency rooms can prescribe medication for pain, they cannot treat underlying dental problems.

Mental Health: Piscataquis County residents report having a higher number of 11+ days Mental Health Not Good (13.0% vs. 11.0%), particularly among 18-44 year olds (19.0% vs. 12.0%). Twenty-one percent (21.0%) of adults are without social/emotional support, higher than the state rate of 17% (County Health Rankings). The hospital admission rate is higher than the state rate for Major Depressive Disorder (171 vs. 157) and Senility and Organic Mental Disorders (15.0 vs. 8.6), and the Emergency Department rate for Senility and Organic Mental Disorders is the highest of any county (41 vs. 28 for Maine). The suicide mortality rate is the highest of any county, 36 vs. 23 for males and 12.0 vs. 5.4 for females. 16.8% of Piscataquis County youth have seriously considered suicide vs. 13.8% for all Maine youth, the second highest percentage of all Maine counties (2009, Maine Integrated Youth Health Survey (MIYHS)).

<u>Substance Abuse</u>: Piscataquis County has the highest rate of binge drinking (during the past month) of any county (19.0% vs. 15.0%) and the highest reported misuse of prescription drugs of any county (3.5% vs. 1.8%)—particularly significant, considering Maine tops the nation in prescription drug abuse (SAMSHA, Treatment Episode Data Set (TEDS) 1998-2008, State Admissions to Substance Abuse Treatment Services, 12/2010). Compared to their statewide peers, a greater percentage of Piscataquis County respondents report ever being diagnosed with a substance abuse problem (5.9% vs. 4.7%). The Emergency Department rate for drug-related psychoses is the highest of any county at 100 vs. 57.

Substance use is prevalent among Piscataquis County youth. The percentage of high school students (grade 9-12) who reported using, in the past month, cigarettes is 25.6% vs. 19.7%; smokeless tobacco, 12.7% vs. 9.5%; alcohol, 39.1% vs. 34.7%; binge drinking, 25.7% vs. 21.3%; marijuana, 25.3% vs. 23.7%; and glue or other inhalant, 14.1% vs. 9.3% (tied for highest of all counties). Lifetime use of heroin and steroid pills/shots were the highest of any county, at 13.6% and 12.5%, respectively (compared to 7.9% and 7.2% statewide), and lifetime use of stimulants and ecstasy was the second highest of all counties, at 11.8% and 14.0%, respectively, vs. 8.6% and 10.2% statewide. 25.4% of Piscataquis County high school students reported being drunk or high at school during the past year, higher than the state rate of 19.1% and the second highest of all counties (2009, MIYHS).

<u>Interpersonal Violence</u>: Fourteen percent (14.0%) of survey respondents reported ever being physically hurt by an intimate partner, compared to 12.0% statewide. According to the 2009 Maine Integrated Youth Health Survey, compared to their statewide peers, fewer Piscataquis County high school students felt safe at school (80.3% vs. 85.5%), the lowest of all counties; and a greater percentage were bullied on school property (27.8% vs. 23.4%), the second highest of all counties.

Community Risk: According to a Maine Home Visiting Needs Assessment (MHVNA) (September 2010, Maine Children's Growth Council), Piscataquis County demonstrates considerable risk for indicator domains related to healthy families. Of the 16 indicator domains assessed, Piscataquis County was deemed to be at increased risk for 9. It is one of the three counties statewide demonstrating high level risk. According to the MHVNA, Piscataquis County demonstrates the greatest risk and least home visiting and substance abuse service capacity. In comparison to state rates, indicators demonstrating risk include, but are not limited to, the following: pre-term births (13.8% vs. 8.7%)¹, low birthweight (10.7% vs. 6.7%)¹, live births for which prenatal care began in the first trimester (80.5% vs. 86.8%)¹, below poverty level (all ages) (16.1%)², free or reduced school lunch eligibility (59.1%)³, high school dropouts, 2008-09 (4.5% vs. 3.4%)¹, rate of reported substantiated maltreatment, 0-17 year olds, per 1,000 (21.8)⁴, and emergency department visits, 0-4 year olds, per 1,000 (898.8)⁴. Substance abuse is also of concern and data is summarized above under Substance Abuse. (¹2011 Maine Kids Count Data Book; ²US Census, Small Area Income and Poverty Estimates, 2009; ³Maine Department of Education; ⁴Maine Home Visiting Needs Assessment 2010)

<u>Access</u>: While there are significant health care needs in Piscataquis County, access to care is somewhat limited. The area contains Health Professional Shortage Area designations for dental, mental health and primary medical care, and is also recognized as having Medically Underserved Populations (US Department of Health and Human Services, Health Resources and Services Administration).

In addition to the limited availability of healthcare professionals, the cost of care prohibits access. *Costly Coverage: Premiums Outpace Paychecks in Maine*, a report published in August 2009 by Families USA, documents that from 2000 through 2009, family health insurance premiums for Maine's workers rose 4.6 times more quickly than median earnings. On average, health care premiums for families rose by more than 101%, while median earnings rose by only a little more than 22%. The lack of affordable health insurance contributes to the high rate of uninsured nonelderly adults (18-64 years): 19% in Piscataquis County vs. 16% statewide (OneMaine). Though 32% of county residents are enrolled in Medicaid, many have difficulty locating providers who accept Medicaid patients.

Accessibility issues result in inadequate care. There is a high percentage of males without a usual source of care (22% vs. 18%) and reporting no checkup in the past 2 years (18% vs. 15%). The percentage of females without a usual source of care is equal to the state rate at 8.3%. The percentage of individuals who reported needing medical care in the past year but could not afford it was 7.1%, higher than the state rate of 6.5%. As noted previously, 32%.0 have had no dental visit in the past two years, compared to 24.0% of Maine residents. Four percent (4.0%) of respondents named the hospital or ER as usual source of care, compared to 1.9% statewide. The rates of Emergency Department visits (59,780) and hospitalizations (13,488) per 100,000 population in Piscataquis County exceeded the state rates of 47,665 and 12,076.

Safe, Affordable Housing

Piscataquis County has 7,825 occupied housing units: 6,055 (77.0%) owner occupied and 1,770 (23.0%) renter occupied (US Census 2010). Housing affordability is determined by the ratio of median home price to median income: under 1.0 is unaffordable. The affordability index for 2009 is 1.43 in Piscataquis County. The median home price is \$74,250. The average two-bedroom rent is \$715.

		% of households unable to afford a median 2-BR rent	(owned & rented)	# housing units with lead paint hazards
Piscataquis	35.9%	58.9%	2,810 (38%)	4,031 (55%)
MAINE	56.4%	55.3%	151,492 (27%)	276,574 (49%)

Sixty-eight (68) individuals in Piscataquis County receive Section 8 rental assistance; 138 are on the waiting list. Approximate wait time is two years (as of June 2011). In a January 26, 2011 point in time survey of individuals who are homeless in Maine, 4 individuals listed Piscataquis County as their last county of residence (MaineHousing).

The costs of heating fuel and gasoline have a significant impact on household budgets. In Piscataquis County, 1,572 households received LIHEAP assistance during the 2010-11 heating season, representing approximately 20.0% of households. The cost of gasoline disproportionately impacts families with low incomes and those living in rural areas. In Piscataquis County, the mean travel time to work is 23.2 minutes (US Census, American Community Survey, 2005-09).

While affordability is an issue for many families, respondents to the Penquis survey were especially concerned with the safety of their homes. Home repair was tied with dental care as their greatest need. Maine has the 5th oldest housing stock in the country, according to MaineHousing. In Piscataquis County, 38% of housing units were built before 1940, higher than Maine's 27%. In the Maine Consolidated Plan 2010-2014, MaineHousing estimates there are 54,784 households with substandard housing in Maine. These households lack attic or wall insulation, have no functioning heating system, or live in a pre-1976 mobile home. Many poor homeowners have rehabilitation needs, and senior homeowners, in particular, are in need of home repair and energy assistance. MaineHousing notes that many elders live in rural communities and that rural areas are often difficult to serve due to the fact that local housing programs are small and often under funded.

Financial Security

Piscataquis County residents are generally poorer than their statewide peers. The unemployment rate for Piscataquis County is 11.5%, higher than the state rate of 7.8% (May 2011, not seasonally adjusted) and the highest of all Maine counties. Piscataquis County has been adversely affected by the decline in manufacturing and natural resource-based industries. The number of wage and salary jobs in manufacturing declined 43.7% from 2000 to 2009. Still, there is a larger share of jobs in manufacturing, as well as in health care and government sectors, compared to most regions of the state. In 2010, the largest major industry sector was Health Care and Social Assistance, with 26% of the employment, followed by Manufacturing (31-33) with 19%, and Retail Trade (44 & 45) with 15%.

From 2005-2009, Piscataquis County's average annual employment decreased by 4.1% (2011 Report on Poverty, Maine State Planning Office). The total number of employees located in Piscataquis County in 2010 was 5,559. The average weekly wage was \$584, the lowest of all Maine counties. This would be equivalent to \$14.60 per hour or \$30,368 per year, assuming a 40-hour week worked the year around (Maine Department of Labor).

Piscataquis County has the third lowest median household income of all Maine counties at \$34,922. The poverty rate is the fifth highest of all Maine counties with 16.1% of all ages in poverty (compared to 12.6% statewide). It has the third highest child poverty rate, with 24.8% of children under 18 years of age in poverty (compared to 17.5% statewide) (2009, US Census, Small Area Income and Poverty Estimates).

Education level influences earning potential. In Piscataquis County, the public high school drop out rate for 2008-09 was 4.5%, higher than the state rate of 3.4% and a .2% increase from the previous year. Some displaced workers and those seeking greater stability and income potential have turned to self-employment as a means of earning a livelihood while remaining in their communities. Piscataquis County's self-employment rate is 29.5%, higher than the state rate (23.3%) and US rate (21.3%) (2009, Carsey Institute).

Financial instability makes it difficult for families to meet basic needs, pay bills, and maintain or build assets. According to the Good Shepherd Food Bank, Maine ranks first in New England in terms of children who are food insecure; 21.1% of Maine children under age 18 lack access to sufficient food. More than half (59.1%) of Piscataquis County schoolchildren are eligible for free or reduced lunch, higher than the state rate of 44.2% and the second highest of all Maine counties (Maine Department of Education). 22.4% of the population receives food supplements (November 2010, 2011 Report on Poverty, Maine State Planning Office). An estimated 3,360 people — 19.6% of Piscataquis County's population — are food insecure. Food distribution has increased 23% across Maine; for Piscataquis County it has increased 128% (Good Shepherd Food Bank).

OTHER CONSIDERATIONS

One important fact to note is that Maine is the oldest state in the nation with a median age of 42.7 years (2010 US Census). This is a trend that has no signs of reversing, due to a low birthrate, outmigration of young adults, and influx of retirees, and has significant implications for health care, the economy, and future infrastructure needs of communities. In Piscataquis County, Senior Services/ Elder Care was cited within the top five community needs. Though other needs cited, such as affordable housing/home repair, are not exclusive to elderly residents, they do largely impact the region's senior population who may have difficulty affording repairs due to fixed incomes and often need home modifications to safely age in place.

It is also significant the degree to which health and disability were cited as concerns. A large number of individuals who responded to the survey identified themselves as having a disability (43%), affordable health insurance coverage was named the greatest community need, physical disability was cited as the greatest barrier to employment, and health/disability was identified as the greatest barrier to accessing services. Further investigation would be beneficial to understand the specific barriers experienced by individuals who have disabilities and to quantify the needs across the county.

CHANGES IN CONDITIONS

There were no significant changes in conditions from the previous needs assessment.



RESPONSE

To address the region's complex needs and utilize limited resources most effectively, Penquis utilizes "best practices" and works collaboratively with the region's nonprofit organizations, governmental agencies, and businesses to identify and implement solutions.

Regarding issues of health and safety:

- Penquis is a member of the Senior Center/Getting Started Committee which is seeking to establish an adult day program and senior center in Piscataquis County.
- Penquis is partnering with the State of Maine to establish a Supervised Visitation and Safe Exchange Center in Piscataquis County.
- Penquis received funding in FY10 and FY11 to work with law enforcement to advance the use of the CornerHouse forensic interviewing method to better serve child victims of sexual assault.
- Penquis has secured funding to provide parenting education to fathers. Trainings will increase knowledge of child development and increase skills that support healthy family relationships.
- Penquis continues to offer a free afterschool and summer program and partner with other regional organizations to provide safe, healthy, and beneficial experiences for 12-15 year olds.

Regarding issues of housing:

- Penquis' subsidiary, MaineStream Finance, secured a renewal of its mortgage line of credit with local banks to help make homeownership affordable to low— and moderate-income families. It also received a one-year funding renewal to continue to provide foreclosure counseling.
- Penquis received funding from MaineHousing and US DHHS in 2011 to support the statewide Family Development Accounts program. Program participants receive a 4:1 savings match to help them achieve their homeownership goals.

Regarding issues of financial security:

- Penquis chairs the Piscataquis County Transition Team, which works to assemble all aid available for laid-off workers.
- Penquis' subsidiary, MaineStream Finance, secured funding to support microenterprise training and technical assistance and increase lending capital available to microenterprises.
- Penquis is a member of a collaborative group that established the Back Pack Feeding Program to address the problem of schoolchildren not having enough to eat over the weekend and during school vacations. Enrollment in the program has risen to 51 children across pre-k to high school.
- Four Penquis staff members were trained in application procedures for the Alfond Scholarship Program to help increase access to post-secondary education for children from low-income families.
- Penquis continues to spearhead annual efforts to provide school supplies and holiday gifts to children to help alleviate the financial burden on low-income families and meet children's needs.
- Penquis participates on the Shared Youth Vision Council, which is working to decrease the incarceration rate for youth and increase the graduation rate in Maine.

Penquis assures that all staff are familiar with community resources in order to assist all clients to access services to meet their needs. Penquis also continues to be involved with Helping Hands with Heart, a local effort that seeks to tap community resources to address the unmet needs of families.